

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028565

Entity Name: SWR, INC.

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

C/I ROBERT A. COOKE
876 BELLE WOOD CIRCLE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

411 WALNUT STREET
PMB 610
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

FEI Number: 59-3436036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOKE, ROBERT A
C/I ROBERT A. COOKE
876 BELLE WOOD CIRCLE
GREEN COVE SPRINGS, FL 32043

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COOKE, ROBERT A.
Address: 876 BELLE WOOD CIRCLE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SD () Delete
Name: COOKE, CAROLYN C.
Address: 576 BELLE WOOD CIRCLE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A COOKE

PRES

04/27/2004

Electronic Signature of Signing Officer or Director

Date